

PART B - FEE(S) TRANSMITTAL

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OCT 31 2007

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Meryl E. Greff

(Depositor's name)

Meryl E. Greff

(Signature)

10/29/07

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/612,781

07/02/2003

Cheryl A. Monachino

LM(F)6221

4387

TITLE OF INVENTION: SCENE ANALYSIS SURVEILLANCE SYSTEM

10/31/2007 NGUYEN2 00000048 10612781

01 FC:1501
02 FC:15041440.00 OP
300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1400

\$300

\$0

\$1700

10/30/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
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CHAWAN, SHEELA C

2624

382-156000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Tarolli, Sundheim

2 Covell & Tummino LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lockheed Martin Corporation

Bethesda, Maryland

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Robert B. Sundheim

Date 10/29/07

Typed or printed name

Robert B. Sundheim

Registration No. 20, 127

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